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| Officers and Civilians Spouses' Club (OCSC) Stuttgart, Germany 2002-2003 Membership Application |
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Please fill out this membership application completely. This information is used for the membership roster and for the OCSC monthly newsletter, "Gruss Gott."

Name: _____

Last Name First Name Middle Initial

| Spouse's/Sponsor's Name | Rank | Service (e.g. USMC, Civ) |
|-------------------------|------|--------------------------|
| | | |

| Sponsor's Organization & Office Symbol (e.g. EUCOM-J1) | Sponsor's Duty Phone | Rotation Date/DEROS (mon/yr) |
|--|----------------------|------------------------------|
|--|----------------------|------------------------------|

Full Military Mailing Address: _____

APO AE _____

German Address: _____
(Include Building & Stairwell,
Street Name, Kaserne and _____
German Zip Code)

Phone Numbers: _____

Home Phone (with prefix) _____

Cell or Work phone (with civilian prefix) _____

Email Address: _____ Your birth date (Month and day only): _____

In order to more efficiently deliver the monthly newsletter "Gruss Gott", OCSC would like to send it out via e-mail. Would you take delivery of the newsletter via e-mail? ☐ Yes ☐ No

| Children | | |
|----------|------|---------|
| Name: | Age: | School: |
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Hobbies and Interests:

Non-DOD Sponsored spouses are responsible for arranging access to Patch Barracks when attending meetings and events . Direct any questions to the reservations chairperson when making reservations.

Because the OCSC is bound by the rules of the SOFA agreement with Germany, non-ID card holding members of the club who participate in a minor fund raiser (i.e. vendors at monthly luncheons) are responsible for paying any taxes due to the German government. The OCSC is not responsible for reporting or collecting the taxes; it is the individual's responsibility.

Article II, Section 6, Stuttgart OCSC Constitution states: *In accordance with the host nation law, all members may be personally liable to creditors, if the assets of the organization are insufficient to discharge all liabilities.*

Signature: _____

Date: _____

Membership Fee: \$30/year Cash

Makes checks payable to: Stuttgart OCSC Check No:

Mail completed application and membership fee to:

Diane Murtha
CMR 480, Box 2254
APO AE 09128

Questions: Call Diane Murtha at 0711-120-8654
or murtha123@hotmail.com

For Office Use Only: Receipt No. _____

